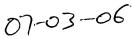
OIPE 4000 W



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance fee notification	rm should be used for tran respondence including the below or directed otherwise is.	Patent, advance or in Block I, by (a	JE FEE and ders and not a) specifying	PUBLICATION FEE (if re tification of maintenance fee a new correspondence addr	equired). Blocks I through 5 s will be mailed to the currer ess; and/or (b) indicating a sep	should be completed where at correspondence address as parate "FEE ADDRESS" for
21874 75 EDWARDS & A P.O. BOX 55874 BOSTON, MA 022 07/05/2006 EAYALE#2 000000	Note: A certificate of mailing can only be used for domestic rec(s) Transmittal. This certificate cannot be used for any other papers. Each additional paper, such as an assignment or formal have its own certificate of mailing or transmission. Express Mail Label No. EV-756 267 834 US Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited v States Postal Service with sufficient postage for FY PAGES mail addressed to the Mail Stop ISSUE FEE address above, or by transmitted to the USPTO (571) 273-2885, on the date indicated					
					Bizokas	(Depositor's name)
01 FC:2501 700.00 D 02 FC:1504 300.00 D					n Brolan	(Signature)
03 FC:8001 30.00 D				Jı	ıne 29, 2006	(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/848,164	05/03/2001	·	Peter R	. Rhode	46146-C2 (48340)	1034
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES \$			\$300	\$1000	06/30/2006
EXAM	EXAMINER			CLASS-SUBCLASS		
VANDERVEGT	VANDERVEGT, FRANCOIS P			530-403000		
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicated PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
(A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion	elow no assignee o	data will app f a substitute (B) RESIDE	sear on the natent. If an acc	ignee is identified below, the or	document has been filed for
	-	ries (will not be pri		•	Corporation or other private gr	roup entity Government
4a. The following fee(s) are Issue Fee	enclosed:	4b	. Payment of A check Payment	Fee(s): in the amount of the fee(s) is by credit card. Form PTO-20	enclosed. 38 is attached. harge the required fee(s), or cr	
	MALL ENTITY status. See	37 CFR 1/27)	b. Applic	cant is no longer claiming SN	IALL ENTITY status. See 37 C	CFR 1.27(g)(2).
NOTE: The Issue Fee and Printerest as shown by the reco	ublication Fee (if required) vords of the United State Pet	will not be accepted but and Trademark	I from anyone Office.	e other than the applicant; a r	usly paid issue fee to the applic egistered attorney or agent; or t	the assignee or other party in
Authorized Signature	- MIM			Date	June 29, 2006	·
Typed or printed name	Jonathan M. Soar	ks. Ph.D.		Registration	n No. 53,624	

In scollection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Complete if Known

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolida	4818). 📙	Complete if Known										
FEE TRANSMITTAL				Application Num	ber	9/848,164-Conf. #1034						
-				Filing Date		May 3, 2001						
For FY 2006				First Named Inventor		Peter Rhode						
				Examiner Name F		F. P. Vandervegt						
X Applicant claims small	l entity status.	See 37 CFR 1.27		Art Unit		1644						
TOTAL AMOUNT OF PAY		Attorney Docket	No.	46146C2(48340)								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
	•		.0.01 13 11	<u> </u>			cept for t	he filing fee				
Charge any additional fee(s) or underpayment of												
fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)												
1. BASIC FILING, SEARCH				ining or may	20 002)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 90.,					
i. DAGIO I ILINO, OLANO	-	IG FEES		RCH FEES	EXAMI	NATION FEES						
		Small Entity		Small Entity		Small Entity						
Application Type	Fee (\$)		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees	<u> Paid (\$)</u>				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CLAIM FEES								Small Entity				
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>				
Each claim over 20 (including Reissues)							50	25				
								100				
Multiple dependent claims							360	180				
Total Claims Extra	Claims I	Fee (\$)	Fee Pa	Paid (\$)		ultiple Dependent Claims						
- 20 =	X	=			<u>Fe</u>	<u>ee (\$)</u> <u>F</u>	ee Paid (<u>5)</u>				
HP = highest numer of total claim			Fee Pa	l4 (\$)				_				
Indep. Claims Extra	Claims _I	Fee (\$) =	гее га	iu (\$)								
HP = highest numer of independ		for, if greater than 3.										
3. APPLICATION SIZE FEE	=							_				
If the specification and dra	awings excee	ed 100 sheets of	paper (e	cluding electro	onically fi	led sequence or o	computer					
listings under 37 CFR	1.52(e)), the	application size	fee due	s \$250 (\$125 fe	or small e	ntity) for each ad	ditional 5	0				
sheets or fraction there	of. See 35 U	J.S.C. 41(a)(1)(G	i) and 37	CFR 1.16(s).								
	xtra Sheets	Number of /50		itional 50 or frac			<u>Fee</u>	Paid (\$)				
- 100 = 4. OTHER FEE(S)		750	"	ound up to a who	ie namber)	^	Fees	Paid (\$)				
` '	on \$130 fe	e (no small entity	v discon	nt)			1 003	1 010 (4)				
Non-English Specification, \$130 fee (no small entity discount) Other (a.g., lete Gling surpherse), 2501 Utility issue fee 700.00												
Other (e.g., late filing surcharge): 2501 Utility issue fee 1504 Publication fee for early, voluntary, or normal								300.00				
8001 Printed copy of patent w/o color								0.00				
SUBMITTED BY	<i>1 </i>	1 /										
Signature	<i>444</i> 777			egistration No.	53,624	Telephone	(617) 43	9-4444				
Name (Print/Type) Jonathan M. Spatks, Ph.D.						Date						
		•										

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/848,164-Conf. #1034 Filing Date TRANSMITTAL May 3, 2001 First Named Inventor **FORM** Peter Rhode Art Unit 1644 (to be used for all correspondence after initial filing) **Examiner Name** F. P. Vandervegt Attorney Docket Number Total Number of Pages in This Submission 46146C2(48340) ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information **Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Identify below): **Extension of Time Request** Terminal Disclaimer Part B - Fee Transmittal (1 page) **Express Abandonment Request** Request for Refund Return Reipt Postcard Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name EDW/RDS PAUMER & DODGE LLP Signature Printed name Nonathan M. Sparks, Ph.D. Date Reg. No. 53,624 June 29, 2006

Application No. (if known): 09/848,164

Attorney Docket No.: 46146C2(48340)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 756 267 834 US in an envelope addressed to:

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on <u>June 29, 2006</u> Date

Signature
Sharon Bizokas
Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal (1 page)
Fee Transmittal Form (1 page)
Part B - Fee Transmittal (1 page)

Charge \$1,030.00 to deposit account 04-1105